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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: lo	dentify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your f	full name		
	Write	the name that is on	Josephine	
	picture	our government-issued cture identification (for cample, your driver's	First name	First name
	license	e or passport).	Middle name	Middle name
	Bring	your picture	Wells	
		ication to your ng with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		her names you have in the last 8 years		
		e your married or n names.		
3.	your S numb Indivi	the last 4 digits of Social Security er or federal dual Taxpayer fication number	xxx-xx-7909	

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Case number (if known)

Debtor 1 Josephine Wells

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 16415 Michigan Ave South Holland, IL 60473 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Cook County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

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Case number (if known) Debtor 1 **Josephine Wells**

ar	t 2: Tell the Court About	Your E	3ankruptcy Ca	ise						
7.	The chapter of the Bankruptcy Code you are				n of each, see <i>Notice R</i> of page 1 and check the		§ 342(b) for Individuals Fili	ing for Bankruptcy		
	choosing to file under	■ Chapter 7 □ Chapter 11								
			Chapter 12							
			Chapter 13							
3.	How you will pay the fee	•	about how yo	u may pay. Ty attorney is sub	pically, if you are payin	etition. Please check with the clerk's office in your local court for more details are paying the fee yourself, you may pay with cash, cashier's check, or money ayment on your behalf, your attorney may pay with a credit card or check with				
					stallments. If you choo hts (Official Form 103A)		nd attach the Application for	r Individuals to Pay		
			but is not requapplies to you	uired to, waive ur family size a	your fee, and may do s and you are unable to pa	so only if your income ay the fee in installme	ou are filing for Chapter 7. E is less than 150% of the o ents). If you choose this opt 103B) and file it with your p	fficial poverty line that ion, you must fill out		
€.	Have you filed for bankruptcy within the	■ N	0.							
	last 8 years?	☐ Y	es.							
			District		When		Case number			
			District		When		Case number			
			District		When		Case number			
10.	Are any bankruptcy cases pending or being	■ N	0							
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	ПΥ	es.							
			Debtor				Relationship to you			
			District		When		Case number, if known			
			Debtor				Relationship to you			
			District		When		Case number, if known			
11.	Do you rent your residence?	■ N	o. Go to li	ine 12.						
		ΠY	es. Has yo	ur landlord obt	tained an eviction judgr	ment against you?				
				No. Go to line	12.					
				Yes. Fill out <i>II</i> this bankrupto		an Eviction Judgment	Against You (Form 101A) a	and file it as part of		

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Case 18-13804 Desc Main Document Page 4 of 46 Case number (if known) Debtor 1 Josephine Wells Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 ☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes.

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

■ No.

☐ Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 **Josephine Wells**

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Der	Josephine Wells				Case numbe			
Par	6: Answer These Questi	ions for Re	porting Purposes					
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by a individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.	Are your debts primarily	business debts? Business deb				
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you	owe that are not consumer debt	ts or busines	s debts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	er 7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and	■ Yes.		Do you estimate that after any available to distribute to unsecur		erty is excluded and administrative expenses?		
	administrative expenses are paid that funds will		■ No					
	be available for distribution to unsecured creditors?		□ Yes					
18.	How many Creditors do you estimate that you	■ 1-49 □ 50-99		□ 1,000-5,000 □ 5001-10,000		□ 25,001-50,000 □ 50,001-100,000		
	owe?	☐ 100-19 ☐ 200-99		10,001-25,000		☐ More than100,000		
19.	How much do you estimate your assets to	□ \$0 - \$5	0,000 1 - \$100,000	□ \$1,000,001 - \$10 mi □ \$10,000,001 - \$50 r		□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion		
	be worth?		01 - \$500,000	□ \$50,000,001 - \$100		☐ \$10,000,000,001 - \$50 billion		
		□ \$500,0	01 - \$1 million	□ \$100,000,001 - \$500	0 million	☐ More than \$50 billion		
20.	How much do you estimate your liabilities	□ \$0 - \$5	0,000 01 - \$100,000	□ \$1,000,001 - \$10 mi □ \$10,000,001 - \$50 r		□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion		
	to be?		01 - \$500,000	□ \$50,000,001 - \$100		□ \$10,000,000,001 - \$50 billion		
			01 - \$1 million	□ \$100,000,001 - \$500	0 million	☐ More than \$50 billion		
Par	Sign Below							
For	you	I have exa	amined this petition, and I de	eclare under penalty of perjury the	hat the inforn	nation provided is true and correct.		
						under Chapter 7, 11,12, or 13 of title 11, noose to proceed under Chapter 7.		
				I not pay or agree to pay someous the notice required by 11 U.S.C.		t an attorney to help me fill out this		
		I request	elief in accordance with the	chapter of title 11, United State	s Code, spe	cified in this petition.		
		bankrupto and 3571	y case can result in fines up			or property by fraud in connection with a rears, or both. 18 U.S.C. §§ 152, 1341, 1519,		
		Josephi	ohine Wells ne Wells of Debtor 1	Signati	ure of Debto	r 2		
		Executed	on _ May 11, 2018	Execut				
			MM / DD / YYYY		MM	/ DD / YYYY		

Debtor 1 Josephine Wells Document Page 7 of 46 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Jonathan R. Haddad	Date	May 11, 2018
Signature of Attorney for Debtor		MM / DD / YYYY
Jonathan R. Haddad 6319215		
Printed name		
The Law Offices of Jonathan R Haddad		
Firm name		
1147 W 175th Street		
Homewood, IL 60430		
Number, Street, City, State & ZIP Code		
Contact phone (708)259-3337	Email address	Jonathan@JRHaddadlaw.com
6319215 IL		
Bar number & State		

Fill in this infor	mation to identify your	case:	eni Paue 8 01 40	
Debtor 1	Josephine Wells			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT OF ILLINOIS		
Case number _				

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

☐ Check if this is an amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	t 1: Summarize Your Assets		
		Your a Value	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	112,268.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	23,036.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	135,304.00
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	239,128.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	555.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	174,571.00
	Your total liabilities	\$	414,254.00
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,626.48
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,370.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other so	hedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a	personal	, family, or

Official Form 106Sum

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

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Case number (if known) Debtor 1 Josephine Wells

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

4,306.70 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clai	m
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	555.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	555.00

				Value per Zillov	V				
	Journey			Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Other information you wish to add about this item, such as local property identification number:					
	Cook			Debtor 2 only					
				Other Who has an interest Debtor 1 only	t in the property? Check one		le, tenanc	ownership interest y by the entireties, or	
	South Ho	olland IL State	60473-0000 ZIP Code	☐ Manufactured☐ Land☐ Investment pr☐ Timeshare	or mobile home	Current value of the entire property?	3.00 p	urrent value of the ortion you own? \$112,268.00	
Street address, if available, or other description		ш .	Iti-unit building or cooperative		the amount of any secured claims on Schedule Creditors Who Have Claims Secured by Proper				
1.1		chigan Ave		What is the property Single-family	• • • • • • • • • • • • • • • • • • • •	Do not deduct sec	ured claims	or exemptions. Put	
. D	o you own or	have any legal or equi			, land, or similar property?				
hink nfor nsv	it fits best. I mation. If mo ver every que	Be as complete and ac- re space is needed, attestion.	curate as possib ach a separate s	le. If two married people heet to this form. On th	an asset fits in more than one e are filing together, both are e top of any additional pages wn or Have an Interest In	equally responsible	for suppl	ying correct	
30	chedu	orm 106A/B le A/B: Pro	<u> </u>					12/15	
Cas	se number				_			Check if this is an amended filing	
Uni	ted States B	ankruptcy Court for th	e: NORTHER	RN DISTRICT OF ILLI	NOIS				
	otor 2 use, if filing)	First Name	Middle	e Name	Last Name				
Deb	otor 1	Josephine We		e Name	Last Name				
FIII	in this info	mation to identify ye	our case and th	nis filing:					
	С	ase 18-13804	Doc 1	Filed 05/11/18 Document	Entered 05/11/1 Page 10 of 46	8 11:20:46	Desc	Main	

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here......=>

\$112,268.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Deb	tor 1	Case 18-138	04 Doc 1	Filed 05/11/18 Document	Entered 05/11/1 Page 11 of 46 Case	8 11:20:46 D	esc Main
3. C a	ars, var	ns, trucks, tractors,	sport utility veh	nicles, motorcycles			
п	No						
-	Yes						
2.4	Make	Toyota		Mha haa an interest in the	manager 2 Observer	Do not deduct secured	d claims or exemptions. Put
3.1	Mode	D4		Who has an interest in the	property? Check one		ured claims on Schedule D: Claims Secured by Property.
	Year:			■ Debtor 1 only □ Debtor 2 only			, , ,
		eximate mileage:	113000	Debtor 1 and Debtor 2 or	nly	Current value of the entire property?	Current value of the portion you own?
	Other	information:		☐ At least one of the debto	rs and another		
	Valu	e per KBB		Check if this is commu (see instructions)	nity property	\$4,025.00	\$4,025.00
5 A .p	ages ye	ou have attached for cribe Your Personal an	Part 2. Write to	n for all of your entries fro hat number here ms erest in any of the followi			\$4,025.00 Current value of the
6. H	ouseho	old goods and furnis	hings	·	ng komo.		portion you own? Do not deduct secured claims or exemptions.
	l No	s: Major appliances, f	urniture, linens,	china, kitchenware			
			ed Living Roo usehold good	om, Dining Room, Bedi Is	oom Furniture and va	rious	\$2,100.00
E] No	s: Televisions and rad		o, stereo, and digital equip edia players, games	ment; computers, printers,	scanners; music colle	ctions; electronic devices
		Use	ed TV, Compu	uter and Cell Phone			\$400.00
E	xample No	les of value s: Antiques and figuri other collections, n		orints, or other artwork; boo lectibles	ks, pictures, or other art ob	ojects; stamp, coin, or	baseball card collections;
E	xample No	nt for sports and ho s: Sports, photograph musical instrument	nic, exercise, and	d other hobby equipment; b	oicycles, pool tables, golf cl	ubs, skis; canoes and	kayaks; carpentry tools;
10. F	Firearm Exampl	s	tguns, ammuniti	on, and related equipment			
	No al Form	106A/B		Schedule A/B: P	roperty		page
OHIC	ar i Ullill	100/10		Scriedule A/B. F	oporty		page

Debtor 1	Case 18-13804 Josephine Wells	Doc 1	Filed 05/11/18 Document	Entered (Page 12 o		Desc Main
☐ Yes.	Describe					
□ No	s bles: Everyday clothes, furs. Describe	, leather coats	, designer wear, shoes,	accessories		
— 165.		N = 41= !	Observa			¢200.00
	Used C	lothing and	Snoes			\$200.00
□ No	Diles: Everyday jewelry, cost Describe		engagement rings, wedd	ding rings, heirlo	om jewelry, watches, gems, g	
	Costun	ne Jewelry				\$300.00
Examp No Yes. 14. Any ot	rm animals oles: Dogs, cats, birds, hors Describe her personal and househouse specific information	old items you	ı did not already list, ir	ncluding any he	alth aids you did not list	
for Pa	the dollar value of all of your art 3. Write that number he	ere	,	•	ages you have attached	\$3,000.00
	scribe Your Financial Assets vn or have any legal or eq		est in any of the follow	ing?		Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No	oles: Money you have in you	•			nand when you file your petition	on
					Cash	\$10.00
Examp			accounts; certificates counts with the same institution n	titution, list each.	s in credit unions, brokerage h	nouses, and other similar
	17.1.	Checking	Bank of A	merica		\$1,000.00
Examp No Yes 19. Non-pu joint v		nt accounts wi	th brokerage firms, mon suer name: corporated and uninco			t in an LLC, partnership, and

Debtor 1	Josephine Wells	Document	Page 13 of 46	ase number (if known)	
Debioi i	Josephine Wells			`	
	Name of entity:			% of ownership:	
Nego Non-i ■ No	nment and corporate bonds and other tiable instruments include personal check negotiable instruments are those you can. Give specific information about them	ks, cashiers' checks, pro	missory notes, and mone		
	Issuer name:				
	ment or pension accounts ples: Interests in IRA, ERISA, Keogh, 40	1(k), 403(b), thrift saving	js accounts, or other pen	sion or profit-sharing plan	s
■ Yes	List each account separately. Type of account:	Institution	name:		
	IRA	Roth IRA	<u> </u>		\$15,000.00
Your Exam ■ No	ity deposits and prepayments share of all unused deposits you have maples: Agreements with landlords, prepaid	I rent, public utilities (ele			or others
■ No	ties (A contract for a periodic payment of Issuer name and descript		r life or for a number of ye	ears)	
26 U.S ■ No	sts in an education IRA, in an account .C. §§ 530(b)(1), 529A(b), and 529(b)(1). Institution name and desc				m.
■ No	s, equitable or future interests in prope	erty (other than anythin	ng listed in line 1), and r	ights or powers exercis	able for your benefit
⊔ Yes	Give specific information about them				
Exam ■ No	ts, copyrights, trademarks, trade secreples: Internet domain names, websites, p Give specific information about them			;	
Exam ■ No	ses, franchises, and other general inta ples: Building permits, exclusive licenses. Give specific information about them		n holdings, liquor license	s, professional licenses	
Money or	property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28. Tax re	funds owed to you				
■ No	Give specific information about them, inc	cluding whether you alre	eady filed the returns and	the tax years	
■ No	y support pples: Past due or lump sum alimony, spo Give specific information	ousal support, child supp	ort, maintenance, divorce	settlement, property sett	lement

Official Form 106A/B Schedule A/B: Property page 4

	Case 18-13804	4 Doc 1	Filed 05/11/18 Document	Entered 05/11/18 11:20:46 Page 14 of 46	Desc Main
Debtor 1	Josephine Wells		Document	Case number (if known)	
Exam	amounts someone owe pples: Unpaid wages, disa benefits; unpaid loa . Give specific information	bility insurance ins you made to		efits, sick pay, vacation pay, workers' compe	nsation, Social Security
	sts in insurance policies oples: Health, disability, or		nealth savings account (HSA); credit, homeowner's, or renter's insurar	nce
■ Yes.	. Name the insurance con Co	npany of each p ompany name:	olicy and list its value.	Beneficiary:	Surrender or refund value:
	<u>Te</u>	erm Life Insu	rance	Bundu Dumbuya	\$1.00
If you somed ■ No □ Yes. 33. Claims Exam ■ No	one has died. Give specific information	ving trust, expension whether or not nent disputes, in	ct proceeds from a life in	surance policy, or are currently entitled to rec it or made a demand for payment	eive property because
■ No □ Yes. 35. Any fi	contingent and unliquid Describe each claim nancial assets you did r Give specific information	 not already list		g counterclaims of the debtor and rights to	o set off claims
				ny entries for pages you have attached	\$16,011.00
Part 5: De	escribe Any Business-Relat	ted Property You	Own or Have an Interest	In. List any real estate in Part 1.	
No. G	own or have any legal or early to Part 6. Go to line 38.	quitable interest	in any business-related p	roperty?	
	escribe Any Farm- and Com you own or have an interest in			n or Have an Interest In.	
■ No.	u own or have any legal . Go to Part 7. s. Go to line 47.	l or equitable ir	nterest in any farm- or o	commercial fishing-related property?	
Part 7:	Describe All Property Yo	ou Own or Have a	an Interest in That You Did	d Not List Above	
Exam ■ No	u have other property of apples: Season tickets, could	ntry club memb			
☐ Yes.	. Give specific information	1			<u> </u>
54. Add	the dollar value of all of	your entries fi	om Part 7. Write that n	umber here	\$0.00

Official Form 106A/B Schedule A/B: Property page 5

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Case number (if known)

Document Debtor 1 **Josephine Wells**

Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$112,268.00 Part 2: Total vehicles, line 5 \$4,025.00 57. Part 3: Total personal and household items, line 15 \$3,000.00 Part 4: Total financial assets, line 36 \$16,011.00 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$23,036.00 Copy personal property total \$23,036.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$135,304.00

Official Form 106A/B Schedule A/B: Property page 6

		DUGITIE	III FAUE 10 UI 40	
Fill in this infor	mation to identify your	case:		
Debtor 1	Josephine Wells			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this amended filir

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amount of the exemption you claim Specific laws that allow exe		Specific laws that allow exemption
Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
\$4,025.00		\$2,400.00	735 ILCS 5/12-1001(c)
		100% of fair market value, up to any applicable statutory limit	
\$4,025.00		\$1,000.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$200.00		\$200.00	735 ILCS 5/12-1001(a)
		100% of fair market value, up to any applicable statutory limit	
\$300.00		\$300.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
	\$4,025.00 \$4,025.00 \$4300.00	\$4,025.00	Schedule A/B \$4,025.00 \$2,400.00 100% of fair market value, up to any applicable statutory limit \$200.00 \$200.00 \$200.00 \$200.00 \$100% of fair market value, up to any applicable statutory limit \$200.00 \$200.00 \$200.00 \$200.00 \$200.00 \$200.00 \$200.00 \$200.00 \$200.00 \$200.00 \$300.00 \$300.00 \$300.00 \$300.00 \$300.00 \$1,000.00 \$1,000.00 \$1,000.00

Entered 05/11/18 11:20:46 Document Page 17 of 46 Debtor 1 Josephine Wells Case number (if known) Brief description of the property and line on Schedule A/B that lists this property Current value of the Amount of the exemption you claim Specific laws that allow exemption portion you own Copy the value from Check only one box for each exemption. Schedule A/B IRA: Roth IRA 735 ILCS 5/12-1006 \$15,000.00 100% Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Filed 05/11/18

Case 18-13804

Yes

Doc 1

Desc Main

		Document Pa	age 1	8 of 46		
Fill in this informat	tion to identify you	ur case:				
Debtor 1	Josephine Well	ls				
	First Name	Middle Name Las	t Name		•	
Debtor 2 (Spouse if, filing)	First Name	Middle Name Las	t Name			
United States Banks	untou Count for the	: NORTHERN DISTRICT OF ILLINO	ıe			
United States Bankı	upicy Court for the	. NORTHERN DISTRICT OF ILLINOI	10			
Case number						
(if known)					_	k if this is an ded filing
					amen	ded illing
Official Form	<u>106D</u>					
Schedule D	: Creditors	s Who Have Claims Se	cure	d by Propert	У	12/15
		If two married people are filing together, bo				ation If more space
is needed, copy the A		out, number the entries, and attach it to thi				
number (if known). 1. Do any creditors ha	ve claims secured h	ov vour property?				
		this form to the court with your other sche	edules. \	ou have nothing else t	o report on this form.	
_	l of the information	•		ou nave neumig elee t	o repent en une renni	
	Secured Claims	below.				
<u> </u>		more than one secured claim, list the creditor	senaratel	Column A	Column B	Column C
for each claim. If more	than one creditor ha	s a particular claim, list the other creditors in Pa		Amount of claim	Value of collateral	Unsecured
much as possible, list t	he claims in alphabet	ical order according to the creditor's name.		Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 Wells Fargo	Home	Describe the property that secures the cl	laim:	\$239,128.00	\$112,268.00	\$126,860.00
Mortgage Creditor's Name		16415 Michigan Ave South Holla		Ψ200,120.00	Ψ112,200.00	Ψ120,000.00
		IL 60473 Cook County	,			
Attn: Bankr	uptcy	Value per Zillow As of the date you file, the claim is: Check	. all that			
3476 Statevi		apply.	t all that			
Fort Mill, SC	y, State & Zip Code	☐ Contingent ☐ Unliquidated				
Number, Street, Or	y, State & Zip Code	☐ Disputed				
Who owes the debt	? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as mortg car loan)	age or se	ecured		
Debtor 2 only						
☐ Debtor 1 and Debto	•	☐ Statutory lien (such as tax lien, mechanic ☐ Judgment lien from a lawsuit	c's lien)			
☐ Check if this clain		☐ Other (including a right to offset)				
community debt		, ,				
	Opened					
	05/05 Last					
Date debt was incurre	Active ed 2/11/14	Last 4 digits of account number	1802			
	•	Column A on this page. Write that number h	ere:	\$239,12	28.00	
Write that number h		the dollar value totals from all pages.		\$239,12	28.00	
Part 2: List Other	s to Be Notified fo	or a Debt That You Already Listed				
		pe notified about your bankruptcy for a deb	t that yo	u already listed in Part 1.	For example, if a colle	ction agency is
trying to collect from	you for a debt you o	owe to someone else, list the creditor in Part you listed in Part 1, list the additional cred	rt 1, and	then list the collection a	gency here. Similarly, if	you have more
debts in Part 1, do no				io. Il you do not nave du	andonal persons to be I	iouned for ally
Nome Number	Stroot City State 9	Zin Codo	_			
	, Street, City, State & ymer Leibert Pi		On wh	ich line in Part 1 did you e	nter the creditor? 2.1	
1 North Dea	arborn Street, S	uite 1200	Last 4	digits of account number		

Chicago, IL 60602

Official Form 106D

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Debtor	r 1	1 Josephine Wells			Case number (if know)		
		First Name	Middle Name	Last Name			
,	We 420	ne, Number, Street, City, ells Fargo 0 Montgomery St n Francisco, CA 9			On which line in Part 1 did you enter the creditor? Last 4 digits of account number		
1	We PO	ne, Number, Street, City, ells Fargo Box 10335 s Moines, IA 5030			On which line in Part 1 did you enter the creditor? Last 4 digits of account number		

	43C 10 1000 + B00	Document Document	Page 20 of	46	TO BOOK IVI	an i
Fill in this infor	mation to identify your case					
Debtor 1	Josephine Wells					
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court for the: NC	RTHERN DISTRICT OF IL	LINOIS			
Office Otates De	ankruptcy Court for the.	KITIERRY DIOTRIOT OF IE				
Case number					□ Chock	if this is an
()					_	ed filing
000 : 15	400E/E					-
Official For		Hava Haaaavaad	Claima			40/45
	E/F: Creditors Who			NOND	DIODITY alabase 1 is	12/15
Schedule D: Credi left. Attach the Co name and case nu	utory Contracts and Unexpired I itors Who Have Claims Secured intinuation Page to this page. If y imber (if known). All of Your PRIORITY Unsecu	by Property. If more space is you have no information to re	needed, copy the Par	rt you need, fill it out, n	umber the entries ir	the boxes on the
	tors have priority unsecured clai					
☐ No. Go to	• •	agames year				
Yes.						
identify what to possible, list the	ar priority unsecured claims. If a ype of claim it is. If a claim has bot he claims in alphabetical order acc than one creditor holds a particula	n priority and nonpriority amour ording to the creditor's name. If	nts, list that claim here a f you have more than tw	and show both priority an	d nonpriority amount	s. As much as
(For an explar	nation of each type of claim, see th	e instructions for this form in the	e instruction booklet.)		Priority amount	Nonpriority amount
	al Revenue Service	Last 4 digits of accou	ınt number	\$555.00	\$555.00	\$0.00
Priority C PO Bo	reditor's Name x 7346	When was the debt in	curred?			
Philade	elphia, PA 19101-7346					
	Street City State Zlp Code ed the debt? Check one.	As of the date you file	, the claim is: Check	all that apply		
_		☐ Contingent				
Debtor 1	•	☐ Unliquidated				
Debtor 2	only	☐ Disputed				
Debtor 1	and Debtor 2 only	Type of PRIORITY un	secured claim:			
☐ At least o	one of the debtors and another	☐ Domestic support o	bligations			
☐ Check if	this claim is for a community d	ebt Taxes and certain of	other debts you owe the	e government		
Is the claim	subject to offset?	Claims for death or	personal injury while y	ou were intoxicated		
No		Other. Specify				
☐ Yes		20	015 Taxes			
Part 2: List A	All of Your NONPRIORITY Ur	secured Claims				
3. Do any credit	tors have nonpriority unsecured	claims against you?				
☐ No. You ha	ave nothing to report in this part. S	ubmit this form to the court with	your other schedules.			
Yes.						
unsecured cla	ur nonpriority unsecured claims nim, list the creditor separately for e itor holds a particular claim, list the	ach claim. For each claim listed	d, identify what type of	claim it is. Do not list clair	ms already included i	in Part 1. If more

Total claim

Part 2.

Debto	or 1 _Josephine Wells	Document Page 2	L 01 45 Case number (if know)	
4.1	ARS/Account Resolution Specialist	Last 4 digits of account number	8983	\$254.00
	Nonpriority Creditor's Name Po Box 459079 Sunrise, FL 33345	When was the debt incurred?	Opened 06/15	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	- '	
	☐ Yes	■ Other. Specify Centers Lt	Attorney Sullivan Urgent Aid	
4.2	Bank of America	Last 4 digits of account number	4850	\$5,157.00
	Nonpriority Creditor's Name 4909 Savarese Circle FI1-908-01-50 Tampa, FL 33634	When was the debt incurred?	Opened 6/09/12 Last Active 1/09/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.3	Ingallas Memorial Hospital Nonpriority Creditor's Name	Last 4 digits of account number		\$2,000.00
	1 Ingallas Drive Harvey, IL 60426	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed	Labelia	
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	og plans, and other similar debts	
	— INU	— Dobio to porision of pront-silani	וא פוטרוס, מווע טנווטו טווווועו עכטנט	

☐ Yes

■ Other. Specify Medical

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DCDIOI	1 Josephine Wells	Case number (if know)	
4.4	Stroger Hosiptal of Cook County Nonpriority Creditor's Name	Last 4 digits of account number	\$40,000.00
	1969 W Ogden Ave	When was the debt incurred?	
-	Chicago, IL 60612 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	The control and year may and statum of chook all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical	
.5	Village of South Holland Nonpriority Creditor's Name	Last 4 digits of account number	\$300.0
	16226 Wausau Avenue South Holland, IL 60473	When was the debt incurred?	
-	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Parking Tickets	
.6	Wells Fargo Home Mortgage	Last 4 digits of account number	\$126,860.0
	Nonpriority Creditor's Name Attn: Bankruptcy 3476 Stateview Blvd Fort Mill, SC 29715	When was the debt incurred?	
-	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	■ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset? ■ No	□ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Estimated Deficiency	

notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

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Debtor 1 **Josephine Wells**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 555.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 555.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 174,571.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 174,571.00

			<u>. </u>	
Fill in this infor	mation to identify your	case:		
Debtor 1	Josephine Wells			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
					_
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.3	City		State	ZIP Code	
2.3					_
	Name				
	Number	Street			
					_
	City		State	ZIP Code	
2.4					_
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	

		Docume	ent Page 25 d	of 46
Fill in this	information to identify your	case:		
Debtor 1	Josephine Wells			
Dobto: 1	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filin	g) First Name	Middle Name	Last Name	
United Stat	tes Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case numb	ner			
(if known)				☐ Check if this is an
				amended filing
Sched Codebtors		e also liable for any deb		12/15 as complete and accurate as possible. If two married tion. If more space is needed, copy the Additional Page
ill it out, ar		boxes on the left. Attach	the Additional Page t	to this page. On the top of any Additional Pages, write
1. Do y	you have any codebtors? (If y	ou are filing a joint case,	do not list either spouse	e as a codebtor.
■ No				
☐ Yes				
■ No. □ Yes.		se, or legal equivalent live	e with you at the time? spouse as a codebtor	r if your spouse is filing with you. List the person show sure you have listed the creditor on Schedule D (Offici
Form 1				06G). Use Schedule D, Schedule E/F, or Schedule G to
	Column 1: Your codebtor Name, Number, Street, City, State and Zll	P Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
2.1				Cohadula D. lina
3.1	Name			Schedule D, line
				☐ Schedule E/F, line ☐ Schedule G, line
_				
	Number Street City	State	ZIP Code	
				_
3.2	Name			Schedule D, line
ľ	чань			☐ Schedule E/F, line
				☐ Schedule G, line
	Number Street			_
(City	State	ZIP Code	

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Eill	in this information to identify your c	asa						
	otor 1 Josephine V							
	otor 2 use, if filing)				_			
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS					
	se number 							
0	fficial Form 106I					MM / DD/ Y		date.
S	chedule I: Your Inc	ome				WIWI / DD/ 1		12/1
sup spo atta	es complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not filing wi	ng jointly, and your inthe your into the second in the sec	spouse i de infori	s livir natio	ng with you, incl n about your spo	ude information a ouse. If more spa	about your ce is needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-filing spe	ouse
	If you have more than one job,	Employment status	■ Employed			☐ Emplo	oyed	
	attach a separate page with information about additional	Employment status	☐ Not employed			☐ Not e	mployed	
	employers.	Occupation	Nurse					
	Include part-time, seasonal, or self-employed work.	Employer's name	Heartland Empl Services	oyment				
	Occupation may include student or homemaker, if it applies.	Employer's address	333 N. Summit S Toledo, OH 436					
		How long employed ti	here? 3 years	i				
Par	t 2: Give Details About Mor	nthly Income						
	mate monthly income as of the duse unless you are separated.	ate you file this form. If y	you have nothing to re	eport for	any lir	ne, write \$0 in the	space. Include yo	ur non-filing
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the informatio	n for all e	employ	ers for that perso	on on the lines belo	ow. If you need
						For Debtor 1	For Debtor 2 o	
2.	List monthly gross wages, sala deductions). If not paid monthly,	3,		2.	\$_	5,253.17	\$	N/A
3.	Estimate and list monthly overt	ime pay.		3.	+\$_	0.00	+\$	N/A
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$_	5,253.17	\$N	/A

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Deb	tor 1	Josephine Wells	-	•	Case	number (if k	nown)				
						r Debtor 1			Debtor :	2 or pouse	
	Cop	by line 4 here	4.		\$_	5,25	3.17	\$		N/A	_
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	58	a.	\$	1,26	1.49	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5ŀ	b.	\$_		0.00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans		c.	\$_	(0.00	\$		N/A	_
	5d.	Required repayments of retirement fund loans		d.	\$_		0.00	\$		N/A	_
	5e.	Insurance		e. •	\$ \$		2.20	\$		N/A	_
	5f. 5g.	Domestic support obligations Union dues	5f 5g		\$ _		0.00	\$ 		N/A N/A	_
	5h.	Other deductions. Specify:		y. h.+	\$ -		0.00	+ \$		N/A	_
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.		* — \$	1,620		\$		N/A	_
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		* — \$	3,620		\$		N/A	_
8.		all other income regularly received:			* –	3,02		–		14/74	_
0.	8a.	Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total									
		monthly net income.	88	a.	\$		0.00	\$		N/A	
	8b.	Interest and dividends	81	b.	\$_		0.00	\$		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce			•			•			
	0 4	settlement, and property settlement.	80		\$_ _		0.00	\$		N/A	_
	8d. 8e.	Unemployment compensation Social Security	86	d. e	\$_ \$		0.00	\$		N/A N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:			\$		0.00	\$		N/A	_
	8g.	Pension or retirement income	ا – 8و		\$ -		0.00	\$		N/A	_
	8h.	Other monthly income. Specify:		h.+	\$		0.00	*		N/A	_
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	— 9.	. :	\$	(0.00	\$		N/A	4
4.0	٠.			_							
10.		culate monthly income. Add line 7 + line 9. I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_		3,626.48	+ \$		N/A	= \$ _	3,626.48
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify:	dep					•	chedule 11.		0.00
12.		d the amount in the last column of line 10 to the amount in line 11. The reste that amount on the Summary of Schedules and Statistical Summary of Certain lies							12.	\$	3,626.48
12	Do	you expect an increase or decrease within the year often you file this form.	2						Ĺ	Combi month	ned ly income
13.		you expect an increase or decrease within the year after you file this form No.	-								

Official Form 106I Schedule I: Your Income page 2

Fill in this	s information to identify yo	ur case:				
Debtor 1	Josephine W	/ells		Checl	k if this is:	
D 11 0				_	An amended filing	
Debtor 2 (Spouse,	if filing)				A supplement show 13 expenses as of	ving postpetition chapter the following date:
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT OF ILL	LINOIS		MM / DD / YYYY	
(If known)						
Offic	ial Form 106J					
Sche	edule J: Your I	Expenses				12/15
informa		possible. If two married people eded, attach another sheet to th y question.				
Part 1:	Describe Your House his a joint case?	hold				
	No. Go to line 2.	n a separate household?				
	□ No	t file Official Form 106J-2, <i>Expens</i>	ses for Separate House	<i>hold</i> of Debte	or 2.	
2. Do	you have dependents?	□No				
Do	not list Debtor 1 and btor 2.	■ Yes. Fill out this information for each dependent	•		Dependent's age	Does dependent live with you?
Do	not state the					□ No
dep	pendents names.		Nephew			■ Yes
			Grand Nephew	,	3	□ No ■ Yes
			Orana Nephew	<u>'</u>		■ res □ No
						☐ Yes
						□ No
						☐ Yes
	your expenses include penses of people other the	■ No				
	urself and your depender					
Estimate		ng Monthly Expenses our bankruptcy filing date unless oankruptcy is filed. If this is a su				
the valu		non-cash government assistanc d have included it on <i>Schedule</i> i			Your expe	enses
`	•	hip expenses for your residence	a. Include first mortage			
	ments and any rent for the		. molude inst moltgage	4. \$		1,500.00
lf n	ot included in line 4:					
4a.	Real estate taxes			4a. \$		0.00
4b.	1 7			4b. \$		0.00
4c.		pair, and upkeep expenses		4c. \$		60.00
4d.		ion or condominium dues	h	4d. \$		0.00

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Debte	Josephine Wells C	Case num	ber (if known)	
6.	Utilities:			
-	6a. Electricity, heat, natural gas	6a.	\$	235.00
	6b. Water, sewer, garbage collection	6b.	·	113.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.		56.00
	6d. Other. Specify: Cable/Internet	6d.	·	150.00
	Food and housekeeping supplies		\$	500.00
	Childcare and children's education costs	7. 8.	\$	
		o. 9.	·	0.00
	Clothing, laundry, and dry cleaning		· ·	80.00
	Personal care products and services	10.	·	100.00
	Medical and dental expenses	11.	\$	80.00
	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$	320.00
	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	•	20.00
	Charitable contributions and religious donations	14.		100.00
	_	14.	Ψ	100.00
	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			
	50 not include insurance deducted from your pay of included in lines 4 of 20. 15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15a. 15b.	·	0.00
	15c. Vehicle insurance	15b.	· ·	
		15d.	· ·	56.00
	15d. Other insurance. Specify:	15d.	Φ	0.00
	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	0.00
	nstallment or lease payments:		Ψ	0.00
	17a. Car payments for Vehicle 1	17a.	\$	0.00
	17b. Car payments for Vehicle 2	17b.	·	0.00
	17c. Other. Specify:	17c.	·	0.00
	17d. Other. Specify:	17d.	·	0.00
	Your payments of alimony, maintenance, and support that you did not report as	174.	Ψ	0.00
	deducted from your pay on line 5, Schedule I, Your Income (Official Form 1061).	18.	\$	0.00
	Other payments you make to support others who do not live with you.		\$	1,000.00
	Specify: Support to Mother	19.	*	1,000.00
	Other real property expenses not included in lines 4 or 5 of this form or on Sched		our Income.	
	20a. Mortgages on other property	20a.		0.00
	20b. Real estate taxes	20b.		0.00
	20c. Property, homeowner's, or renter's insurance	20c.		0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	·	0.00
	20c. Maintenance, repair, and upkeep expenses 20c. Homeowner's association or condominium dues	20u. 20e.	·	
			·	0.00
١.	Other: Specify:	21.	+Φ	0.00
2.	Calculate your monthly expenses			
	22a. Add lines 4 through 21.		\$	4,370.00
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$,
	22c. Add line 22a and 22b. The result is your monthly expenses.		\$	4,370.00
	.20. Add into 22d and 22b. The result is your monthly expenses.			4,370.00
3.	Calculate your monthly net income.			
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	3,626.48
	23b. Copy your monthly expenses from line 22c above.	23b.	-\$	4,370.00
	23c. Subtract your monthly expenses from your monthly income.			740.50
	The result is your monthly net income.	23c.	\$	-743.52
	Do you expect an increase or decrease in your expenses within the year after you			o or doorooo beessee
	For example, do you expect to finish paying for your car loan within the year or do you expect your n modification to the terms of your mortgage?	nortgage	payment to increas	se or decrease because of a
	No.			
	☐ Yes.			

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Fill in th	nis informatio	on to identify your	case:					
Debtor '	1 ,	losephine Wells						
		irst Name	Middle Name	Las	t Name			
Debtor 2								
(Spouse if,	filing) F	ïrst Name	Middle Name	Las	t Name			
United S	States Bankru	ptcy Court for the:	NORTHERN DISTRICT	T OF ILLINO	S			
Case nu	ımber						Charle if this is an	
(II KIIOWII)							☐ Check if this is an amended filing	
You mus	st file this for g money or p	m whenever you fil	connection with a ban	s or amende	ed schedules. M	laking a false sta	tement, concealing property, o 000, or imprisonment for up to	
	Sign Be	low						
Dio	d you pay or	agree to pay some	one who is NOT an atto	rney to help	you fill out ban	kruptcy forms?		
	No							
	Yes. Name	e of person					nkruptcy Petition Preparer's Notion, and Signature (Official Form 1	
		f perjury, I declare e and correct.	that I have read the sun	nmary and s	chedules filed v	vith this declarat	ion and	
Х	/s/ Joseph	ine Wells		X				
	Josephine				Signature of De	ebtor 2		
	Signature of	Debtor 1						
	Date May	11, 2018			Date			

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-:11	in this inform	-4: 4 i-l4if				
		ation to identify you				
Del	btor 1	Josephine Wells	Middle Name	Last Name		
	btor 2					
(Spo	ouse if, filing)	First Name	Middle Name	Last Name		
Uni	ited States Ban	kruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS		
	se number				_	theck if this is an mended filing
Sta	as complete ar	of Financial		are filing together, both are	ankruptcy equally responsible for sup	
). Answer every que		unis formi. On the top of an	y additional pages, write you	ii name and case
			arital Status and Where You	Lived Before		
1.	What is your	current marital statu	is?			
	☐ Married■ Not marr	ied				
2.	During the la	st 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. List	all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>i</i> .	
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	dress:	Dates Debtor 2 lived there
3. state					ity property state or territory ico, Texas, Washington and W	
	■ No □ Yes. Mak	ke sure you fill out <i>Scl</i>	hedule H: Your Codebtors (O	fficial Form 106H).		
Pai	rt 2 Explain	the Sources of You	r Income			
4.	Fill in the total	amount of income yo	nployment or from operating u received from all jobs and a have income that you receive	all businesses, including part		ndar years?
	□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until I for bankruptcy:	■ Wages, commissions, bonuses, tips	\$17,922.41	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

Debtor 1 Josephine Wells Document Page 32 of 46 Case number (if known)

					Debtor	1				Debtor 2		
						s of income all that apply.	(bef	ss income ore deductions and usions)	I	Sources of ince Check all that a		Gross income (before deductions and exclusions)
	last cal			er 31, 20	■ Wag bonuses	ges, commissions, \$54,696.00 es, tips		☐ Wages, combonuses, tips	missions,			
					□ Орег	ating a business				Operating a	business	
				pefore ther 31, 20		es, commissions, s, tips		\$52,396.00)	☐ Wages, combonuses, tips	missions,	
					□ Орег	ating a business				☐ Operating a l	business	
5.	Include and oth winning List eac	inconer p gs. If ch so	ome rega ublic ber you are	ardless on the fit payr filing a jour distribution of the ground in the	f whether that ind ments; pensions; pint case and you	come is taxable. Ex rental income; inte u have income that	amples rest; div you rec		e ali lecte it on	ed from lawsuits; lly once under De	royalties; and btor 1.	ecurity, unemployment, d gambling and lottery
					Debtor	1				Debtor 2		
						of income	eac (bef	ss income from h source ore deductions and usions)	l	Sources of inco		Gross income (before deductions and exclusions)
Par	rt 3: L	_ist (Certain	Payment	ts You Made Be	fore You Filed for	Bankru	ıptcy				
6.	□ No	es.	Neither individual During to No. Yes * Subje	Debtor all primarial primarial primarial continuation of the paid not incited to adjust of the polymer of the p	I nor Debtor 2 h Iy for a personal ys before you file o line 7. pelow each credithat creditor. Do nclude payments streent on 4/01/ tor 2 or both ha ys before you file o line 7.	a family, or household for bankruptcy, do tor to whom you pa not include payment to an attorney for the and every 3 years of the primarily considered for bankruptcy, do	umer do bld purpo lid you p hid a tota nts for c this ban rs after t umer do lid you p	ebts. Consumer de ose." pay any creditor a to all of \$6,425* or mor domestic support ob kruptcy case. that for cases filed of	re in bliga on o	of \$6,425* or more pay tions, such as cher after the date of of \$600 or more?	e? ments and thild support a	
			— res	inclu		domestic support of						nclude payments to an
	Credit	or's	Name a	ınd Addı	ess	Dates of payme	ent	Total amount paid		Amount you still owe	Was this p	payment for

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Case number (if known) Debtor 1 Josephine Wells Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Nο Yes. List all payments to an insider. **Insider's Name and Address** Dates of payment Total amount Amount you Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address Total amount Amount you Reason for this payment Dates of payment still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number Wells Fargo Bank NA **Foreclosure Cook County Circuit Court** Pending ☐ On appeal Josephine Wells □ Concluded 2014-CH-10392 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Date Value of the property **Explain what happened** 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Amount Date action was taken

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

No

☐ Yes

Page 34 of 46 Document Case number (if known) Debtor 1 Josephine Wells Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No ☐ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Value Dates you gave the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. ☐ No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You The Law Offices of Jonathan R Haddad Attorney Fees \$2132.00 \$2,500.00 1147 W 175th Street Filing Fee & Credit Report \$368.00 Homewood, IL 60430 Jonathan@JRHaddadlaw.com 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

No

☐ Yes Fill in the details.

Person Who Was Paid Address

Description and value of any property transferred

Date payment or transfer was made

Amount of payment

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Debtor 1 Josephine Wells

18.	Within 2 years before you filed for bankrup transferred in the ordinary course of your k Include both outright transfers and transfers minclude gifts and transfers that you have alread No	ousiness or financial affa ade as security (such as t	airs? the granting of a		-			
	Yes. Fill in the details.							
	Person Who Received Transfer Address	Description and v		payme	ibe any property or ents received or debts n exchange	Date transfer was made		
	Person's relationship to you			·	Ū			
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-print No		ny property to a	a self-settle	d trust or similar device	of which you are a		
	☐ Yes. Fill in the details.							
	Name of trust	Description and v	alue of the pro	operty trans	ferred	Date Transfer was made		
Pai	rt 8: List of Certain Financial Accounts, In	etrumante Safa Danasi	Povos and S	torago Unit	6			
rai	List of Certain Financial Accounts, in	istruments, sale Deposi	i boxes, and s	norage onic	5			
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred?	cy, were any financial ac	counts or inst	ruments he	ld in your name, or for y	our benefit, closed,		
	Include checking, savings, money market, houses, pension funds, cooperatives, asso				t; shares in banks, credi	t unions, brokerage		
	Yes. Fill in the details.							
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer		
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed for	bankruptcy, a	any safe dep	posit box or other depos	itory for securities,		
	■ No □ Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?		
22.	Have you stored property in a storage unit	or place other than your	home within	1 year befor	e you filed for bankrupto	cy?		
	No							
	Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or it to it? Address (Number, State and ZIP Code)		Describe :	the contents	Do you still have it?		
Pai	rt 9: Identify Property You Hold or Control	I for Someone Else						
23.			ude any prope	rty you borr	rowed from, are storing t	or, or hold in trust		
	■ No □ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value		
Pa	rt 10: Give Details About Environmental Inf	formation						
	the purpose of Part 10, the following definit							
	and parpose or rain 10, the following definite	upp.j.						

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Official Form 107

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Case number (if known) Document

Debtor 1 **Josephine Wells**

> toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

	hazardous material, pollutant, contaminant, or similar term.											
Rep	ort a	Il notices, releases, and proceedings th	hat yo	u know about, regardless of wher	n the	ey occurred.						
24.	Has	any governmental unit notified you that	at you	may be liable or potentially liable	unc	der or in violation of an environme	ental law?					
		No										
		Yes. Fill in the details.										
		ne of site dress (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice					
25.	Hav	Have you notified any governmental unit of any release of hazardous material?										
		No Yes. Fill in the details.										
		ne of site dress (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice					
26.	Have	e you been a party in any judicial or adı	lminis	trative proceeding under any envi	ironı	mental law? Include settlements a	and orders.					
	■	No Yes. Fill in the details.										
		se Title se Number		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case					
Pa	rt 11:	Give Details About Your Business or	r Conr	nections to Any Business								
27.	With	nin 4 years before you filed for bankrup	otcy, d	lid you own a business or have ar	ny of	the following connections to any	business?					
		☐ A sole proprietor or self-employed	in a tr	rade, profession, or other activity,	, eith	er full-time or part-time						
		☐ A member of a limited liability comp	pany	(LLC) or limited liability partnersh	ip (L	LP)						
		☐ A partner in a partnership										
		☐ An officer, director, or managing ex	xecuti	ve of a corporation								
		☐ An owner of at least 5% of the votin	ng or	equity securities of a corporation								
		No. None of the above applies. Go to	Part 1	2.								
		Yes. Check all that apply above and fil			s.							
	Bus	siness Name		scribe the nature of the business		Employer Identification number						
		dress nber, Street, City, State and ZIP Code)	Nar	ne of accountant or bookkeeper		Do not include Social Security in Dates business existed	number or ITIN.					
28.		nin 2 years before you filed for bankrup itutions, creditors, or other parties.	otcy, d	lid you give a financial statement	to ar	nyone about your business? Inclu	de all financial					
	■ No											
		Yes. Fill in the details below.										
	Name Address (Number, Street, City, State and ZIP Code) Date Issued											

Part 12: Sign Below

Page 37 of 46 Case number (# known) Debtor 1 Josephine Wells

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Jo	sephine Wells					
Josephine Wells		Signature of Debtor 2	Signature of Debtor 2			
Signa	ture of Debtor 1					
Date	May 11, 2018	Date				
Did yo	u attach additional pages to Yo	ur Statement of Financial Affairs for Individuals Filing	for Bankruptcy (Official Form 107)?			
No						
□ Yes						
Did yo	u pay or agree to pay someone	who is not an attorney to help you fill out bankruptcy	forms?			
No						
☐ Yes	. Name of Person Attach	the Bankruptcy Petition Preparer's Notice, Declaration, an	nd Signature (Official Form 119).			

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Fill in this inforn	nation to identify your	case:			
Debtor 1	Josephine Wells				
Dobto. 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	NORTHERN DIS	TRICT OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an
					amended filing
Official Fo	rm 108				
		n for India	iduala Eilina III	nder Chanter	7
Statemer	it of intentic	ni ioi inaiv	riduals Filing U	ider Chapter	12/15
If you are an indi	vidual filing under obs	ntor 7 you must fil	Lout this form if:		
•	vidual filing under cha claims secured by yo		out this form in:		
_			at avairad		
	ed personal property a s form with the court v		ot expired. you file your bankruptcy pet	ition or by the date set fo	or the meeting of creditors.
whiche	ver is earlier, unless t		e time for cause. You must a		
on the f	form				
	ople are filing togethe d date the form.	r in a joint case, bo	th are equally responsible fo	r supplying correct infor	mation. Both debtors must
Re as complete a	and accurate as nossil	nle If more snace is	needed attach a senarate s	sheet to this form. On the	top of any additional pages,
	our name and case nu		niceaea, attaon a separate s	neet to this form. On the	top of any additional pages,
5 V 11 (V	0 11: 14:11				
Part 1: List Yo	our Creditors Who Hav	re Secured Claims			
•	-	art 1 of Schedule D	: Creditors Who Have Claims	Secured by Property (O	fficial Form 106D), fill in the
information be Identify the cre	low. editor and the property	that is collateral	What do you intend to do secures a debt?	with the property that	Did you claim the property as exempt on Schedule C?
0					
	ells Fargo Home M	ortgage	Surrender the property.		No
name:			Retain the property and		☐ Yes
Description of	16415 Michigan A	ve South	☐ Retain the property and e Reaffirmation Agreement		Li res
property	Holland, IL 60473		☐ Retain the property and [
securing debt:	Value per Zillow				
	our Unexpired Persona		in Schedule G: Executory Co	ontracts and Unevnired L	eases (Official Form 106G), fill
					ease period has not yet ended.
You may assume	an unexpired person	al property lease if	the trustee does not assume	it. 11 U.S.C. § 365(p)(2).	
Describe your u	nexpired personal pro	perty leases		w	fill the lease be assumed?
Docorino your u	noxpirou porconai pro	porty roudou			m mo loudo so dodamou i
Lessor's name:					l No
Description of lea Property:	sed			_	1 v
. roporty.				L	l Yes
Lessor's name:				Г	l No
Description of lea	sed			_	
Property:					l Yes
Lessor's name:				-	l No
LESSOI S HAITIE.				L	l No

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

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Deb	otor 1	Josephine Wells	Case number (if known	n)
	scriptior perty:	n of leased		
FIU	perty.			☐ Yes
	sor's na			□ No
		of leased		_
Pro	perty:			☐ Yes
Les	sor's na	ame:		□ No
	•	n of leased		
Pro	perty:			☐ Yes
	sor's na			□ No
		n of leased		_
FIU	perty:			☐ Yes
	sor's na			□ No
		n of leased		
FIU	perty:			☐ Yes
Par	t 3:	Sign Below		
		alty of perjury, I declare that I have indica at is subject to an unexpired lease.	ated my intention about any property of my estate that s	ecures a debt and any personal
Χ	/s/ Jo	osephine Wells	X	
	Jose	phine Wells	Signature of Debtor 2	
	Signa	ture of Debtor 1		
	Date	May 11, 2018	Date	
			-	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:		Liquidation	
\$24	5	filing fee	-
\$7	5	administrative fee	
+ \$1	5	trustee surcharge	
\$33	5	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 18-13804 Doc 1 Filed 05/11/18 Entered 05/11/18 11:20:46 Desc Main Document Page 44 of 46

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In r	e Josephine W	ells					Case No.		
					Debtor(s)		Chapter	7	
	DIS	SCLC	OSURE OF COM	PENSATI	ON OF ATT	TORNEY	FOR DI	EBTOR(S)	
1.	compensation paid	to me w	29(a) and Fed. Bankr. P. 2 vithin one year before the e debtor(s) in contemplat	filing of the p	etition in bankrup	ptcy, or agree	ed to be paid	to me, for servi	
	For legal servi	ces, I ha	ave agreed to accept				·	2,132.00	-
			nis statement I have recei				·	2,132.00	_
	Balance Due					\$	·	0.00	-
2.	The source of the co	ompens	ation paid to me was:						
	Debtor		Other (specify):						
3.	The source of comp	ensatio	n to be paid to me is:						
	Debtor		Other (specify):						
4.	■ I have not agree	ed to sha	are the above-disclosed c	compensation v	with any other per	rson unless tl	ney are mem	bers and associ	ates of my law firm.
	☐ I have agreed to copy of the agree	share teement,	the above-disclosed comp together with a list of the	pensation with e names of the	a person or person people sharing in	ons who are in the compen	not members sation is atta	or associates of ached.	f my law firm. A
5.	In return for the abo	ove-disc	closed fee, I have agreed	to render legal	l service for all as	spects of the	bankruptcy o	ease, including:	
	b. Preparation and	filing o	financial situation, and r of any petition, schedules, ebtor at the meeting of cr	, statement of a	affairs and plan w	vhich may be	required;	-	ı bankruptcy;
	Negotiati reaffirma	ons w	ith secured creditors greements and applic avoidance of liens on	ations as ne	eded; prepara	; exemption tion and fil	n planning ing of moti	preparation ions pursuan	and filing of t to 11 USC
6.	Represer	ntation	tor(s), the above-disclose n of the debtors in any rsary proceeding.	ed fee does not y dischargea	include the followability actions,	wing service judicial lier	: n avoidanc	es, relief fron	n stay actions or
				CERT	IFICATION				
this	I certify that the for bankruptcy proceedi		is a complete statement of	of any agreeme	ent or arrangemen	nt for paymer	nt to me for r	epresentation of	f the debtor(s) in
ı	May 11, 2018				/s/ Jonathan I	R. Haddad			
_	Date			_	Jonathan R. I	Haddad 631	19215		
					Signature of Att The Law Office		than R Ha	ddad	
					1147 W 175th				
					Homewood, I (708)259-3337		3)991-2058		
					Jonathan@JF	RHaddadla			
					Name of law fire	\overline{m}			

United States Bankruptcy CourtNorthern District of Illinois

		1101 them District of Immors		
In re	Josephine Wells		Case No	
		Debtor(s)	Chapter 7	
	VE	CRIFICATION OF CREDITOR N	MATRIX	
		Number of	f Creditors:	10
	The above-named Debtor(s) (our) knowledge.) hereby verifies that the list of cred	itors is true and correct t	o the best of my
Date:	May 11, 2018	/s/ Josephine Wells Josephine Wells Signature of Debtor		

ARS/Account Resolution Specialist Po Box 459079 Sunrise, FL 33345

Bank of America 4909 Savarese Circle Fl1-908-01-50 Tampa, FL 33634

Ingallas Memorial Hospital 1 Ingallas Drive Harvey, IL 60426

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346

McCalla Raymer Leibert Pierce, LLC 1 North Dearborn Street, Suite 1200 Chicago, IL 60602

Stroger Hosiptal of Cook County 1969 W Ogden Ave Chicago, IL 60612

Village of South Holland 16226 Wausau Avenue South Holland, IL 60473

Wells Fargo 420 Montgomery St San Francisco, CA 94104

Wells Fargo PO Box 10335 Des Moines, IA 50306

Wells Fargo Home Mortgage Attn: Bankruptcy 3476 Stateview Blvd Fort Mill, SC 29715